Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) DAY & ZIMMERMANN INC FEDERAL PAC (AKA 'DAYPAC - FEDERAL') 1500 Spring Garden Street ADDRESS (number and street) (Check if address is changed) Philadelphia 19130 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS preston.hawkins@dayzim.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00341271 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Mr. Preston Hawkins Type or Print Name of Treasurer Mr. Preston Hawkins [Electronically Filed] 04 13 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Use

Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

(Revised 06/2012)

F	FFC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>				
		OMMITTEE	i aye 🚣				
Can	didate Committee:						
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.	)				
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)							
Name Cand							
Cand Party	lidate Affiliati	on Office Sought: House Senate President	State				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name Cand							
Part	y Con	y Committee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Polit	tical A	ction Committee (PAC):					
(e)	$\times$	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a				
		X Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	t Fund	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political				
	Committees Participating in Joint Fundraiser						
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

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V	Vrite or Type Committee Name	9					
	DAY & ZIMMER	MANN INC FEDERAL	PAC (AKA 'DA	AYPAC - FEDERAL')			
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint	Fundraising Representa	tive, or Leadership PAC Sponsor			
D	Day & Zimmermann, I	nc.					
Π							
	Mailing Address	1500 Spring Garden Street					
	Maining Address						
		Philadelphia	PA	19130			
		CITY	STAT	E ZIP CODE			
	_			_			
	Relationship: X Connected	d Organization Affiliated Committee	Joint Fundraising Repres	entative Leadership PAC Sponsor			
<b>'</b> .	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.						
	Full Name						
	Mailing Address						
	Title or Position	CITY	STATE	ZIP CODE			
			Telephone number				
3.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	ne treasurer of the commi	ttee; and the name and address of			
	Full Name Mr. Presto of Treasurer	n Hawkins					
	Mailing Address	1500 Garden Street					
		Philadelphia		19130			
	<b>T 5</b>	CITY	STATE	ZIP CODE			
	Title or Position VP, Corporate Financ		Telephone number	215 - 299 - 8553			

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Full Name of Designated Agent Preston	Hawkins					
Mailing Address	1500 Spring Garden Street					
	Philadelphia	PA 1	9130			
	CITY	STATE	ZIP CODE			
Title or Position VP, Corporate Financ		elephone number 215				
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.    Citizens Bank						
Mailing Address	2001 Market Street					
	Philadelphia	PA [1	9103			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.						
Mailing Address						

## : 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F1A Transaction ID:

Change of address and change of treasurer.

Form/Schedule: Transaction ID: